

# Cancer and Specified Diseases

NCFlex offers Cancer and Specified Disease Insurance through Allstate Benefits (AB). It is hard to face the facts, but cancer will affect many of us — regardless of age, gender or lifestyle. While treatment has advanced the fight against cancer, it still occurs in 1 in 2 men and in 1 in 3 women, according to Cancer Facts and Figures, American Cancer Society, 2010.

## Coverage

You can choose between three plan options depending on your cancer insurance needs and specified diseases. All three plan options offer the same type of benefits and/or services. In most cases, however, the amount of coverage differs. The benefits under the Low, High and Premium Options are progressively higher than the previous option. Refer to the “Summary of Benefits” on page 27 for more details.

**In addition to cancer coverage, this insurance pays benefits for 29 other specified diseases listed below:**

- Amyotrophic Lateral Sclerosis (Lou Gehrig’s Disease)
- Muscular Dystrophy
- Poliomyelitis
- Multiple Sclerosis
- Encephalitis
- Rabies
- Tetanus
- Tuberculosis
- Osteomyelitis
- Diphtheria
- Scarlet Fever
- Cerebrospinal Meningitis (bacterial)
- Brucellosis
- Sickle Cell Anemia
- Thalassemia
- Rocky Mountain Spotted Fever
- Legionnaire’s Disease (confirmation by culture or sputum)
- Addison’s Disease
- Hansen’s Disease
- Tularemia
- Hepatitis (chronic B or chronic C with liver failure or hepatoma)
- Typhoid Fever
- Myasthenia Gravis
- Reye’s Syndrome
- Primary Sclerosing Cholangitis (Walter Payton’s Liver Disease)
- Lyme Disease
- Systemic Lupus Erythematosus
- Cystic Fibrosis
- Primary Biliary Cirrhosis

Cancer benefits are provided by Supplemental, Limited Benefit insurance, policy form GVCP2 or the state variation thereof, underwritten by American Heritage Life Insurance Company, a subsidiary of The Allstate Corporation.

*Allstate Benefits (AB) is the marketing name  
for American Heritage Life Insurance Company  
(Home Office: Jacksonville, Florida)*

## Cost

The monthly premium you pay for cancer coverage is based on the plan you choose and whether you choose to cover yourself only or yourself and your family.

Cost	Employee Only	Employee and Family
Low Option	\$6.78	\$11.26
High Option	\$15.68	\$26.06
Premium Option	\$21.64	\$35.96

## Examples of Net Cost

Each plan option includes the Cancer Screening Benefit, which pays a benefit for each covered insured **annually** for taking certain tests, regardless of the cost of the test. In addition, since your monthly premium is subtracted from your pay before taxes, you receive tax savings.

The following are a few examples of how the Cancer Screening Benefit and the tax savings affect your total cost for your NCFlex Cancer Insurance.

Option	Annual Cost	Cancer Screening Benefit	Tax Savings (30% Tax Bracket)	NET Annual Cost
Low — Employee	\$81.36 (\$6.78/Month)	\$25	\$24.40	\$31.96 (\$2.66/Month)
High — Family	\$312.72 (\$26.06/Month)	\$200 (2 @ \$100)	\$93.81	\$18.91 (\$1.56/Month)
Premium — Family	\$431.52 (\$35.96/Month)	\$200 (2 @ \$100)	\$129.45	\$102.07 (\$8.51/Month)

## Limitations and Exclusions

**Pre-Existing Condition** — A pre-existing condition is a disease or physical condition for which the covered person received medical advice or treatment during the 12-month period prior to the effective date of the covered person’s coverage. AB does not pay for any loss due to a pre-existing condition during the 12-month period beginning on the date that person became a covered person. This is true whether you are required to provide EOI or not when you apply for the coverage. Any covered loss that is incurred after the 12-month period is payable.

## Medicaid Information

*For individuals who are eligible for Medicaid, this cancer insurance policy may not be the best choice for you. Benefits assigned under the policy are required to be assigned back to Medicaid.*

## Summary of Benefits

You must review the Certificates of Coverage for complete details regarding these benefits.

Benefit	Low Option	High Option***	Premium Option***
Cancer Prevention and Screening Benefit* (per calendar year/per covered insured)	\$25	\$100	\$100
Continuous Hospital Confinement (per day) (up to 70 days for each period of continuous confinement)	\$100	\$200	\$300
Extended Benefits** (per day after 70 days)	up to \$100	up to \$200	up to \$300
Surgery** (per surgery, based on surgical schedule)	up to \$1,500	up to \$3,000	up to \$4,500
Second Surgical Opinion**	up to \$200	up to \$400	up to \$600
Anesthesia**	up to 25% of surgery benefit		
Ambulatory Surgical Center** (per day)	up to \$250	up to \$500	up to \$750
Radiation/Chemotherapy** (per 12-month period)	up to \$2,500	up to \$7,500	up to \$10,000
Inpatient Drugs and Medicine**	up to \$25 per day while confined in the hospital		
Private Duty Nursing Services** (per day)	up to \$100	up to \$200	up to \$300
New or Experimental Treatment**	up to \$5,000 per 12-month period		
Blood, Plasma and Platelets** (per 12-month period)	up to \$2,500	up to \$7,500	up to \$10,000
Physician's Attendance**	up to \$50 per day		
At Home Nursing** (per day)	up to \$100	up to \$200	up to \$300
Prosthesis**	up to \$2,000 per amputation		
Ambulance**	up to \$100		
Hospice Benefits:			
Freestanding Hospice Care Center** (per day)	up to \$100	up to \$200	up to \$300
Hospice Care Team** (per day; limit 1 visit/day)	up to \$100	up to \$200	up to \$300
Government or Charity Hospital (per day; in lieu of all other benefits in the policy, except the Waiver of Premium benefit)	\$100	\$200	\$300
Outpatient Lodging** (day/per 12 months)	\$50/\$2000	\$50/\$2000	\$50/\$2000
Non-Local Transportation	pays coach fare or \$0.40 per mile		
Family Member Lodging and Transportation (for one adult member of covered person's family)			
Lodging**	up to \$50 per day; maximum 60 days		
Transportation**	round-trip coach fare on common carrier or \$0.40 per mile		
Extended Care Facility** (per day)	up to \$100	up to \$200	up to \$300
Physical or Speech Therapy**	up to \$50 per day		
Comfort/Anti-Nausea**		up to \$200 per calendar year	
Bone Marrow or Stem Cell Transplant			
Transplant other than non-autologous (per calendar year)	up to \$500	up to \$1,000	up to \$1,500
Transplant for non-autologous; treatment of cancer or other specified disease; except Leukemia (per calendar year)	up to \$1,250	up to \$2,500	up to \$3,750
Transplant for non-autologous; treatment of Leukemia (per calendar year)	up to \$2,500	up to \$5,000	up to \$7,500
Waiver of Premium	premiums waived after 90 days of disability due to cancer for insured employee		

\* Cancer Prevention and Screening Benefit includes: CA-15-3 (cancer antigen 15-3 blood test for breast cancer); CA125 (cancer antigen 125-blood test for ovarian cancer); CEA (carcinoembryonic antigen-blood test for colon cancer); chest x-ray; colonoscopy; flexible sigmoidoscopy; hemocult stool analysis; mammography; Pap smear; PSA (Prostate Specific Antigen blood test for cancer); and Serum Protein Electrophoresis (test for myeloma). This benefit is paid regardless of the result of the test.

\*\*These benefits are payable based on actual charges up to the maximum amount listed.

\*\*\*With the High and Premium Options, you have the option to assign the screening benefit to LifeStrive. See page 28 for details.

**Exclusions and Limitations** — The policy does not pay for any loss except those due from cancer or a covered specified disease. A diagnosis must be submitted to support each claim.

## Portability Privilege

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The portability feature allows continuation of your cancer coverage when your employment ends or policy terminates, by paying premiums directly to Allstate Benefits (AB).

## Certificate of Coverage

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The Certificate of Coverage provides complete details about the benefits and the limits and exclusions. For complete details, you must review the Certificates of Coverage located on [www.ncflex.org](http://www.ncflex.org).

## Tax Issue

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If premiums are paid through your employer's Section 125 cafeteria plan, benefit amounts received from accident and health insurance that exceed qualified medical expenses incurred by you or your covered family members may be taxable for federal and state income tax purposes. It is your responsibility to report this income on your individual tax return(s). Please consult your tax advisor on these issues before making a decision.

## LifeStrive®: Enhanced Screening Benefit for High and Premium Option

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NCflex offers you the ability to assign the wellness benefit included with the High Option and Premium Option. By assigning your screening benefit to LifeStrive, you will complete a comprehensive blood screening and be provided with a personalized report. With access to web-based assessment tools, you can use your confidential, personal health profile to learn about how to get and stay well.

## LifeStrive: Cancer Coverage Wellness Benefit for High and Premium Options

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Health issues, such as cholesterol levels, blood sugar and diabetes, can be detected through a blood test. LifeStrive offers annual blood testing with a report that you can take to your physician to review. You will also have access through a website for the latest information on disease prevention and health topics.

When you elect either the Cancer High Option or the Premium Option, you have \$100 in wellness benefits available for you and each of your enrolled dependents. You may either use the wellness benefit toward a cancer screening, or you may assign the wellness benefit to LifeStrive to participate in an annual blood test, which can help you become aware of potential health risks.

By choosing to assign your \$100 cancer wellness benefit to LifeStrive:

- You will receive an **annual blood test** with the results reported directly to you. You are encouraged to review and take the results to your physician for input and guidance.
- You will have access to a **personalized portal through LifeStrive**, providing internet access to health assessment tools to assist you in understanding health issues you may discuss with your physician.
- The personalized website includes **Trend Tracker**, which will keep track of all your annual blood tests with LifeStrive and enable you to review past blood tests. You will be able to view online videos and health promotion strategies to assist in lowering your risk of illness and improving your overall health.

To learn more about LifeStrive and the valuable services it provides and for the Cancer Wellness Assignment Form, please visit [www.ncflex.org](http://www.ncflex.org) under the "General Benefits Info" tab and click on "LifeStrive."

## Evidence of Insurability

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Evidence of Insurability (EOI) is a way of providing proof of good health. This evaluation may include your current health status, medical history and family medical history. If you are required to submit EOI (see below), Allstate Benefits (AB) must approve your EOI before coverage becomes effective. You can access an EOI form by visiting the "Resources" section at [www.ncflex.org](http://www.ncflex.org). If you are enrolling online, you will be prompted to complete the EOI information.

## Determining if EOI is Required

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### Newly Eligible:

- You may elect coverage on a guaranteed issue basis within 30 days. You do not need to provide Evidence of Insurability (EOI).

### Existing Employees:

- If you did not elect Cancer Insurance for your family when it was first offered to you, and you decide to enroll for coverage for the first time, you will need to submit EOI.
- If you did elect Cancer Insurance for yourself when it was first offered to you, and you have a qualifying event, you will not need to submit EOI as long as you enroll your newly eligible dependents within 30 days of the qualifying event.
- If you did not elect Cancer Insurance when it was first offered to you, and you decide to enroll for coverage for the first time, you will need to submit EOI.
- If you elect to increase your coverage during this enrollment or at a later date, EOI will be required.

## Submitting EOI

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You will be prompted to complete the EOI information as part of the online enrollment process.